973-473-1222

United States Environmental Protection Agency OMB Approval 2070-0174 Washington, D.C. 20460 EPA FORM 6300-4 DATA CALL-IN RESPONSE INSTRUCTIONS: Please type or print in ink. Please read carefully the attached instructions and supply the information requested on this form. Use additional sheet(s) if necessary. 1. Company Name and Address 3. Date and Type of DCI and Number 2. Case # and Name 0569 - Sodium dichloro-s-triazinetrione QUALCO, INC. 17-Jun-2019 225 PASSAIC ST Chemical # and Name: 081404 **GENERIC** PASSAIC, NJ 07055 Sodium dichloro-s-triazinetrione ID # GDCI-081404-1795 6. Generic Data 7. Product Specific Data 4. EPA Product 5. I wish to cancel Registration this product registration 7b. My product is an EUP and I 7a. My product is an MUP and I 6b. I agree to satisfy Generic Data 6a. I am claiming a Generic Data voluntarily agree to satisfy the EUP agree to satisfy the MUP Exemption because I obtain the Requirements as indicated on the requirement on the attached form requirement on the attached form active ingredient from the source attached form entitled entitled "Requirements Status and entitled "Requirements Status and "Requirements Status and EPA registration number listed Registrant's Response." Registrant's Response." Registrant's Response." below. 3525-143 N/A N/A 100% repack *Product ingredient source information may be entitled to confidential treatment* 8. Certification: I certify that the statements made on this form and all attachments are true, accurate, and complete. I acknowledge that any 9. Date knowingly false or misleading statement may be punishable by fine, imprisonment or both under applicable law. Signature and Title of Company's Authorized Representative Deblue Schaub-09/10/20 11. Phone Number Name of Company

QUALCO INC.

United States Environmental Protection Agency Washington, D.C. 20460

REQUIREMENTS STATUS AND REGISTRANT'S RESPONSE

OMB Approval 2070-0174 EPA FORM 6300-3

INSTRUCTIONS: Please type or print in ink. Please read carefully the attached instructions and supply the information requested on this form. Use additional sheet(s) if necessary. 1. Company Name and Address 2. Case # and Name 3. Date and Type of DCI and Number 0569 - Sodium dichloro-s-triazinetrione 17-Jun-2019 QUALCO, INC. **GENERIC** 225 PASSAIC ST Chemical # and Name: 081404 PASSAIC, NJ 07055 Sodium dichloro-s-triazinetrione ID # GDCI-081404-1795 8. Time 6. Use 7. Test 9. Registrant 4. Guideline 5. Study Title **Progress** R Frame Requirement Reports Pattern Substance Response (Months) Number 0 T 0 C 0 2 3 Applicator Exposure Data Requirements (Conventional Chemical) Y R,S,T,U,V,W,X,Y,Z,CC, 24 6 875.1400 Inhalation exposure-indoor Dear (17, 18, 29, 30, 33) R,S,T,U,V,W,X,Y,Z,CC, TEP 12 6 875,1700 (17, 18, 29, N **Product Use Information Environmental Fate Data Requirements (Conventional Chemical)** R,S,T,U,V,W,X,Y,Z,CC, 12 6 835.1230 Sediment and soil absorption/desorption for parent and (2, 7)N Degr degradates N R,S,T,U,V,W,X,Y,Z,CC, 24 Aerobic aquatic metabolism (2)Degr 835.4300 R,S,T,U,V,W,X,Y,Z,CC,6 24 Degr 835.4400 Anaerobic aquatic metabolism (2) N Nontarget Plant Protection Data Requirements (Conventional Chemical) 6 R,S,T,U,V,W,X,Y,Z,CC, 12 850.4100 Seedling Emergence and Seedling Growth (1, 28)N Degr R,S,T,U,V,W,X,Y,Z,CC,12 850.4150 Vegetative Vigor (1, 28)N Degr 6 10. Certification: I certify that the statements made on this form and all attachments are true, accurate, and complete. I acknowledge that any 11. Date knowingly false or misleading statement may be punishable by fine, imprisonment or both under applicable law. Deblue Schaub 09/10/20 Signature and Title of Company's Authorized Representative 13. Phone Number 12. Name of Company QUALCO INC. 973-473-1222

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REQUIREMENTS STATUS AND REGISTRANT'S RESPONSE

OMB Approval 2070-0174 EPA FORM 6300-3

INSTRUCTIONS: Please type or print in ink. Please read carefully the attached instructions and supply the information requested on this form. Use additional sheet(s) if necessary. 1. Company Name and Address 2. Case # and Name 3. Date and Type of DCI and Number 17-Jun-2019 0569 - Sodium dichloro-s-triazinetrione QUALCO, INC. **GENERIC** 225 PASSAIC ST Chemical # and Name: 081404 PASSAIC, NJ 07055 Sodium dichloro-s-triazinetrione ID # GDCI-081404-1795 8. Time 6. Use 7. Test 9. Registrant 4. Guideline 5. Study Title **Progress** R Substance Frame Requirement Reports Pattern Response (Months) Number 0 T 0 C 0 2 3 Nontarget Plant Protection Data Requirements (Conventional Chemical) R,S,T,U,V,W,X,Y,Z,CC, 12 Aquatic Plant Toxicity Using Lemna spp N 850.4400 (2, 19, 22)Degr 6 Post-Application Exposure Data Requirements (Conventional Chemical) R,S,T,U,V,W,X,Y,Z,CC, TEP 24 6 875.2300 Indoor surface residue dissipation (10, 32, 33)Y Residue Chemistry Data Requirements for Food Uses (Conventional Chemical) 6 Y R,S,T,U,V,W,X,Y,Z,CC, TEP 24 860.1460 Food handling (11, 14, 33)Terrestrial and Aquatic Nontarget Organisms Data Requirements (Conventional Chemical) 12 6 R,S,T,U,V,W,X,Y,Z,CC, 850.1010 Aquatic invertebrate acute toxicity, test, freshwater N Degr (2)daphnids R,S,T,U,V,W,X,Y,Z,CC, 12 6 N Degr 850.1025 Oyster acute toxicity test (shell deposition) (2, 6)R,S,T,U,V,W,X,Y,Z,CC, 6 Dear 12 850.1035 Mysid acute toxicity test (2)N

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Company Name and Address 2.		2. Case # and Name	2. Case # and Name						3. Date and Type of DCI and Number		
QUALCO, INC. 225 PASSAIC ST PASSAIC, NJ 07055		0569 - Sodium dichloro-s-triazin Chemical # and Name: 081404 Sodium dichloro-s-triazinetrione	Э			17-Jun-2019 GENERIC ID # GDCI-081404-1795					
4. Guideline Requirement Number	5. Study Title			P Progress R Reports O T O C O			6. Use Pattern	7. Test Substance	8. Time Frame (Months)	9. Registrant Response	
					2	3					
	Terrestrial and Aquatic Nontarget Org (Conventional Chemical)	ganisms Data Requirements			2						
850.1055	Bivalve acute toxicity test (embryo larva	(2, 6)	N				R,S,T,U,V,W,X,Y,Z,CC, DD	Degr	12	6	
850.1075	Fish acute toxicity test, freshwater and r	narine (2, 8, 13)	N				R,S,T,U,V,W,X,Y,Z,CC,	TEP	12	6	
850.1300	Daphnid chronic toxicity test	(2)	N				R,S,T,U,V,W,X,Y,Z,CC,	Degr	12	6	
850.1350	Mysid chronic toxicity test	(2)	N				R,S,T,U,V,W,X,Y,Z,CC,	Degr	12	6	
850.1400	Fish early-life stage toxicity test	(2, 3)	N				R,S,T,U,V,W,X,Y,Z,CC, DD	Degr	12	6	
810.2600	Disinfectants and Sanitizers for Use in V	Vater (4, 5, 33)	Υ				R,S,T,U,V,W,X,Y,Z,CC, DD	TGAI	24	6	
835.3110	Ready biodegradability	(2, 9, 27)	N				R,S,T,U,V,W,X,Y,Z,CC, DD	Degr	12	6	
835.3220	Porous pot test	(2, 9, 26)	N				R,S,T,U,V,W,X,Y,Z,CC, DD	Degr	12	6	
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REQUIREMENTS STATUS AND REGISTRANT'S RESPONSE

OMB Approval 2070-0174 EPA FORM 6300-3

1. Company Name and Address 2. Case # and Name											
Continue	INSTRUCTIONS: Please type or print in ink. Please read carefully the attached instructions and supply the information requested on this form. Use additional sheet(s) if necessary.										
Requirement Number	QUALCO, INC. 225 PASSAIC ST		0569 - Sodium dichloro-s-triazin Chemical # and Name: 081404	е			17-Jun-2019 GENERIC				
835.3240 Simulation Test-Aerobic Sewage Treatment-Activated (2, 9, 25) N R,S,T,U,V,W,X,Y,Z,CC, Degr 12 6 Sludge Simulation Tests to Assess the Biodegradability of (2, 9, 24) N R,S,T,U,V,W,X,Y,Z,CC, Degr 12 6 Chemicals Sol.3300 Modified Activated Sludge, Respiration Inhibition Test (2, 9, 15, 23) N R,S,T,U,V,W,X,Y,Z,CC, Degr 12 6 DD R,S,T,U,V,W,X,Y,Z,CC, Degr 14 6 DD R,S,T,U,V,W,X,Y,Z,CC, Degr 15 6 DD R,S,T,U,V,W,X,Y,Z,CC, Degr 16 DD R,S,T,U,V,W,X,Y,Z,CC, Degr 17 DD R,S,T,U,V,W,X,Y,Z,CC, Degr 18 DE R,S,T,U,V,W,X,Y,Z,CC, DEgr 19 DE R,S,T,U,V,W,X,Y,Z,CC, DE	Requirement	5. Study Title			R Reports O T O C O					Frame	9. Registrant Response
Sludge 835.3280 Simulation Tests to Assess the Biodegradability of Chemicals 850.3300 Modified Activated Sludge, Respiration Inhibition Test (2, 9, 15, 23) N 850.4500 Algal Toxicity (2, 21, 31) N 850.4550 Cyanobacteria (Anabaena flos-aquae) Toxicity (2, 20, 31) N SS-Migration Migration studies (12, 16, 33) Y SS-Migration Migration studies (2, 9, 24) N R,S,T,U,V,W,X,Y,Z,CC, Degr 12 6 R,S,T,U,V,W,X,Y,Z,CC, Degr 12 6 R,S,T,U,V,W,X,Y,Z,CC, Degr 12 6				L	1	2	3				
	835.3280 850.3300 850.4500 850.4550	Sludge Simulation Tests to Assess the Biodegra Chemicals Modified Activated Sludge, Respiration I Algal Toxicity Cyanobacteria (Anabaena flos-aquae) T	nhibition Test (2, 9, 24) (2, 9, 15, 23) (2, 21, 31) (2, 20, 31)	N N N				DD R,S,T,U,V,W,X,Y,Z,CC, DD R,S,T,U,V,W,X,Y,Z,CC, DD R,S,T,U,V,W,X,Y,Z,CC, DD R,S,T,U,V,W,X,Y,Z,CC, DD R,S,T,U,V,W,X,Y,Z,CC, DD R,S,T,U,V,W,X,Y,Z,CC,	Degr Degr Degr Degr	12 12 12 12	6 6 6